DATE :     -   () -	-05 Paper No.:
01/	
TO SPE OF : ART UNIT	
SUBJECT : Request for Certificate of Co	orrection on Patent No.: 6944630
A response is requested with respect to the	ne accompanying request for a certificate of correction.
Please complete this form and return v	with file, within 7 days to:
Palm location 7580, Certificates of Co	orrection Branch – South Tower – 9A22
If response is for an IFW, return to employee (named below) via PUBSCofC Team in MADRAS.  With respect to the change(s) requested, correcting Office and/or Applicant's errors, should the patent read as shown in the certificate of correction (COCIN)? No new matter should be introduced, nor should the scope or meaning of the claims be changed.	
Thank You For Your Assistance	Certificates of Correction Branch
	Tel. No. 703-308-9390 EXT 119
Note your decision on the appropriate box.  Approved	
— Approved	All changes apply.
☐ Approved in Part	All changes apply.  Specify below which changes do not apply.
☐ Approved in Part☐ Denied	Specify below which changes do not apply.  State the reasons for denial below.
☐ Approved in Part☐ Denied	Specify below which changes do not apply.
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☐ Approved in Part☐ Denied	Specify below which changes do not apply.  State the reasons for denial below.  BEST AVAILABLE COP
☐ Approved in Part☐ Denied	Specify below which changes do not apply.  State the reasons for denial below.